Healthcare professionals, policy-makers, researchers and consumers need up-to-date information about preventing and treating COVID-19. We created a global database of new and ongoing randomized trials that we update every week. We share the latest research evidence and highlight gaps to help improve future research.

What we did

Aim
Decision-makers are making decisions about COVID-19 that affect the health of millions of people. Researchers have been quick to do studies about COVID-19, but it can be difficult to stay up to date. We wanted to bring together the global evidence about preventing, treating and rehabilitating people with COVID-19 regularly and in one place.

Activity
The COVID-NMA initiative has three parts:

1. **Mapping** randomized controlled trials about the effectiveness of interventions for preventing and treating COVID-19 and assessing vaccines. We update our study register and evidence map every week so it is ‘live’;
2. **Living evidence syntheses** of the effectiveness of treatments for COVID-19. When the results of new randomised trials become available, we check the methods used in the trial to see if the studies are trustworthy. We synthetize the results of all the trials comparing the similar treatments. The results are available and updated every week on our website ([https://covid-nma.com/](https://covid-nma.com/)).
3. Recording data about the **quality** and transparency of the study designs. We send the researchers who conducted the trial an assessment of the quality of their own study plus a summary of the quality assessments for all studies to them improve their future research.

Collaboration
Cochrane France and the Centre of Research Epidemiology Statistics (CRESS), Université de Paris (France) are working in partnership with the World Health Organization (WHO) and Cochrane Germany, Cochrane Chile, Cochrane Ireland, Cochrane South Africa, Cochrane Response and the Cochrane Bias Methods Group. Other partners are the French National Centre for Scientific Research (France), the Centre for Evidence-Based Medicine Odense (Denmark), the Epistemonikos Foundation (Chile), and the University of Milan (Italy).
What we achieved

- So far, we have screened over 46,000 articles about COVID-19 research. We have screened almost 6,000 registered studies. Almost 2,000 of these are randomized trials on our database. These numbers grow every week.

- Our evidence has been used by guideline panels and Health Technology Assessment bodies around the world to develop policies and guidelines. For example, we are working with WHO and the UK National Institute for Health and Care Excellence (NICE) to inform their recommendations.

- Our living map shows where in the world studies are being completed. Researchers and funders can clearly see where there are gaps in the research and where there is already evidence so they can avoid duplication.

What we learnt

1. **Cochrane can be innovative and cost-efficient.** We used existing information about trials from the WHO International Clinical Trial Registry Platform. We created new ‘live’ interactive tools make the information easier to access. We adapted to focus only on randomized trials when these were available.

2. **Giving researchers direct feedback can improve the quality of research.** The outcomes in trials varied a lot and this was a barrier to drawing together evidence. We now contact researchers before or just after their trial has begun to help them use consistent outcomes and measurement approaches.

3. Cochrane Groups and our partners are working together to make the best use of everyone’s skills. Researchers think the work is valuable, so they have volunteered to help.

Learn more

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Read more about us here:
- https://zenodo.org/communities/covid-nma/
- https://twitter.com/CovidNma
- https://www.acpjournals.org/doi/10.7326/M20-5261

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